Filing Company: State Tracking Number: #1410063 \$50 Safeco Insurance Company of Illinois

Company Tracking Number: 08-AR-042008-F

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: Personal Auto

Project Name/Number: Punitive Damages Buyback/08-AR-042008-F

## Filing at a Glance

Company: Safeco Insurance Company of Illinois

Product Name: Personal Auto SERFF Tr Num: SAFA-125570244 State: Arkansas

TOI: 19.0 Personal Auto SERFF Status: Closed State Tr Num: #1410063 \$50 Co Tr Num: 08-AR-042008-F State Status: Fees verified and Sub-TOI: 19.0001 Private Passenger Auto

(PPA) received

Co Status: Filing Type: Form Reviewer(s): Alexa Grissom, Betty

> Montesi, Brittany Yielding Disposition Date: 04/08/2008

Authors: Betty Osher, Wanda

Varnell

Date Submitted: 04/03/2008 Disposition Status: Approved

Effective Date Requested (New): 06/26/2008 Effective Date (New): 06/26/2008

Effective Date Requested (Renewal): 06/26/2008 Effective Date (Renewal):

State Filing Description:

### **General Information**

Project Name: Punitive Damages Buyback Status of Filing in Domicile: Not Filed

Project Number: 08-AR-042008-F **Domicile Status Comments:** 

Reference Organization: Reference Number: Reference Title: Advisory Org. Circular:

Filing Status Changed: 04/08/2008

State Status Changed: 04/08/2008 Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

In response to requests from our agents and insureds, we are now offering insureds with higher limits of liability the opportunity to further protect their financial interests by allowing them to buy back the punitive or exemplary damages exclusion under Part A of the policy.

## **Company and Contact**

Filing Company: Safeco Insurance Company of Illinois State Tracking Number: #1410063 \$50

Company Tracking Number: 08-AR-042008-F

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: Personal Auto

Project Name/Number: Punitive Damages Buyback/08-AR-042008-F

**Filing Contact Information** 

Betty Osher, State Filings Analyst betosh@safeco.com
Safeco Plaza (206) 473-5309 [Phone]
Seattle, WA 98185 (206) 473-6722[FAX]

**Filing Company Information** 

Safeco Insurance Company of Illinois CoCode: 39012 State of Domicile: Illinois 2800 West Higgins Road Group Code: 163 Company Type: P&C

**Suite 1100** 

Hoffman Estates, IL 60195-5205 Group Name: State ID Number:

(800) 544-2614 ext. [Phone] FEIN Number: 91-1115311

-----

**Filing Fees** 

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No

Fee Explanation: \$50.00 per filing.

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

Safeco Insurance Company of Illinois \$0.00 04/03/2008

CHECK NUMBER CHECK AMOUNT CHECK DATE 1410063 \$50.00 03/21/2008

Filing Company: Safeco Insurance Company of Illinois State Tracking Number: #1410063 \$50

Company Tracking Number: 08-AR-042008-F

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: Personal Auto

Project Name/Number: Punitive Damages Buyback/08-AR-042008-F

## **Correspondence Summary**

## **Dispositions**

Status	Created By	Created On	Date Submitted
Approved	Alexa Grissom	04/08/2008	04/08/2008

Filing Company: Safeco Insurance Company of Illinois State Tracking Number: #1410063 \$50

Company Tracking Number: 08-AR-042008-F

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: Personal Auto

Project Name/Number: Punitive Damages Buyback/08-AR-042008-F

## **Disposition**

Disposition Date: 04/08/2008

Effective Date (New): 06/26/2008

Effective Date (Renewal):

Status: Approved

Comment:

Rate data does NOT apply to filing.

Filing Company: Safeco Insurance Company of Illinois State Tracking Number: #1410063 \$50

Company Tracking Number: 08-AR-042008-F

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: Personal Auto

Project Name/Number: Punitive Damages Buyback/08-AR-042008-F

Item Type Item Name Item Status Public Access

Yes

Supporting Document Uniform Transmittal Document-Property & Approved

Casualty

Supporting Document Cover Letter Approved Yes

Form Safeco Optimum Package-Liability Approved Yes

Coverage, Coverage for Punitive

Damages

Filing Company: Safeco Insurance Company of Illinois

State Tracking Number: #1410063 \$50

Company Tracking Number: 08-AR-042008-F

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: Personal Auto

Project Name/Number: Punitive Damages Buyback/08-AR-042008-F

## **Form Schedule**

Review	Form Name	Form #	Edition	Form Type Action	<b>Action Specific</b>	Readability	Attachment
Status			Date		Data		
Approved	Safeco Optimum	SA-	4/08	Endorseme New			SA_2750EP
	Package-Liability	2750/EP		nt/Amendm			_042008_f.p
	Coverage,			ent/Conditi			df
	Coverage for			ons			
	Punitive						
	Damages						

### SAFECO OPTIMUM PACKAGE LIABILITY COVERAGE COVERAGE FOR PUNITIVE DAMAGES

### PART A — LIABILITY COVERAGE

### **EXCLUSIONS**

The **punitive or exemplary damages** exclusion does not apply if Punitive Damages Coverage is shown on your Declarations page.

SA-2750/EP 4/08

Filing Company: Safeco Insurance Company of Illinois State Tracking Number: #1410063 \$50

Company Tracking Number: 08-AR-042008-F

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: Personal Auto

Project Name/Number: Punitive Damages Buyback/08-AR-042008-F

## **Rate Information**

Rate data does NOT apply to filing.

Filing Company: Safeco Insurance Company of Illinois State Tracking Number: #1410063 \$50

Company Tracking Number: 08-AR-042008-F

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: Personal Auto

Project Name/Number: Punitive Damages Buyback/08-AR-042008-F

## **Supporting Document Schedules**

**Review Status:** 

Satisfied -Name: Uniform Transmittal Document- Approved 04/08/2008

Property & Casualty

**Comments:** 

Attachments: FFS-1 2007.pdf PCTD-1 2007.pdf

**Review Status:** 

Satisfied -Name: Cover Letter Approved 04/08/2008

Comments: Attachment:

AR Cover Letter.pdf

## FORM FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes forms) (Do not refer to the body of the filing for the forms listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #  08-AR-042008-F							
2.	This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if applicable)  N/A							
3.	Form Name /Description/Synopsis	Form # Include edition date	Replacement Or withdrawn?		If replacement, give form # it replaces	Previous state filing number, if required by state		
01	Safeco Optimum Package –Liability Coverage, Coverage for Punitive Damages	SA-2750/EP 4/08	With	acement idrawn				
02			With	acement idrawn				
03				acement idrawn				
04				acement idrawn				
05				acement idrawn				
06				acement idrawn				
07				acement idrawn				
08			With	acement idrawn				
09			With	acement idrawn				
10				acement ndrawn				

# **Property & Casualty Transmittal Document**

	Reserved for Insurance Dept. Use Only	a. I b. A c. I d. I e. H	b. Analyst: c. Disposition: d. Date of disposition of the filing: e. Effective date of filing: New Business Renewal Business f. State Filing #: g. SERFF Filing #:							
3.	Group Name								Group NAIC #	
	Safeco Insurance Companies			T	I _				163	
4.	Company Name(s)	44.		Domicile		AIC#	FEIN #		State #	
	Safeco Insurance Company of I	Illinois		Illinois	390	012	91-111	5311		
	Commons Tracking Number			8. A R.042008.F						
5	Company Tracking Number		08.4	R-042008-F						
5.	Company Tracking Number			R-042008-F						
Con	tact Info of Filer(s) or Corpora		r(s) [	include toll-free			щ			
	tact Info of Filer(s) or Corpora Name and address	Title	r(s) [			hber]	#		e-mail	
Con	tact Info of Filer(s) or Corpora Name and address Betty Osher	Title Senior	r(s) [	include toll-free Telephone #	ŧs	FAX		hoto		
Con	tact Info of Filer(s) or Corpora Name and address Betty Osher Safeco Plaza	Title Senior Forms	r(s) [	include toll-free	ŧs			beto	e-mail sh@safeco.com	
Con	tact Info of Filer(s) or Corpora Name and address Betty Osher	Title Senior	r(s) [	include toll-free Telephone #	ŧs	FAX		beto		
Con	tact Info of Filer(s) or Corpora Name and address Betty Osher Safeco Plaza	Title Senior Forms	r(s) [	include toll-free Telephone #	ŧs	FAX		beto		
Con	tact Info of Filer(s) or Corpora Name and address Betty Osher Safeco Plaza	Title Senior Forms	r(s) [	Telephone #	ŧs	FAX 206.473.6		beto		
Con	tact Info of Filer(s) or Corpora Name and address Betty Osher Safeco Plaza	Title Senior Forms	r(s) [	include toll-free Telephone #	ŧs	FAX 206.473.6		beto		
Con 6.	Name and address Betty Osher Safeco Plaza Seattle, WA. 98105	Title Senior Forms Analyst	r(s) [	Telephone #	ŧs	FAX 206.473.6		beto		
7. 8.	Name and address Betty Osher Safeco Plaza Seattle, WA. 98105  Signature of authorized filer	Title Senior Forms Analyst zed filer	<b>c</b> (s) [	Telephone # 206.473.5309  Betty Osher	ts (a)	FAX 206.473.6		beto		
7. 8.	Name and address Betty Osher Safeco Plaza Seattle, WA. 98105  Signature of authorized filer Please print name of authori ng information (see General Type of Insurance (TOI)	Title Senior Forms Analyst  zed filer	ns for 19.0	Telephone # 206.473.5309  Betty Osher descriptions of Personal Auto	f the	FAX 206.473.6 ese fields)	722	beto		
7. 8. Filip 9.	Name and address Betty Osher Safeco Plaza Seattle, WA. 98105  Signature of authorized filer Please print name of authori ng information (see General Type of Insurance (TOI) Sub-Type of Insurance (Sub-Type of Insurance (Sub-Type Oslice)	Title Senior Forms Analyst  zed filer Instruction	ns for 19.0	206.473.5309  Betty Osher descriptions of	f the	FAX 206.473.6 ese fields)	722	beto		
7. 8. Filit 9. 10.	Name and address Betty Osher Safeco Plaza Seattle, WA. 98105  Signature of authorized filer Please print name of authori ng information (see General Type of Insurance (TOI) Sub-Type of Insurance (Sub-State Specific Product code(s) applicable)[See State Specific Requi	Title Senior Forms Analyst  zed filer Instruction  (If) (if) rements]	ns for 19.0 N/A	206.473.5309  Betty Osher descriptions of Personal Auto  001 Private Pas	f the	FAX 206.473.6 ese fields) ger Auto (PI	722	beto		
7. 8. Filit 9. 10. 11.	Name and address  Betty Osher Safeco Plaza Seattle, WA. 98105  Signature of authorized filer Please print name of authori  ng information (see General  Type of Insurance (TOI)  Sub-Type of Insurance (Sub- State Specific Product code(s) applicable)[See State Specific Requi Company Program Title (Mark	Title Senior Forms Analyst  zed filer Instruction  (If) (if) rements]	ns for 19.0 N/A Pers	Betty Osher descriptions of Personal Auto Prog	f the	FAX 206.473.6 ese fields) ger Auto (PI	722 PA)			
7. 8. Filit 9. 10.	Name and address Betty Osher Safeco Plaza Seattle, WA. 98105  Signature of authorized filer Please print name of authori ng information (see General Type of Insurance (TOI) Sub-Type of Insurance (Sub-State Specific Product code(s) applicable)[See State Specific Requi	Title Senior Forms Analyst  zed filer Instruction  (If) (if) rements]	ns for 19.0 19.0 N/A Pers	Betty Osher descriptions of Personal Auto Prograte/Loss Cost	f the	FAX 206.473.6 ese fields) ger Auto (PI	722 PA) Rates/Rul	les		
7. 8. Filit 9. 10. 11.	Name and address  Betty Osher Safeco Plaza Seattle, WA. 98105  Signature of authorized filer Please print name of authori  ng information (see General  Type of Insurance (TOI)  Sub-Type of Insurance (Sub- State Specific Product code(s) applicable)[See State Specific Requi Company Program Title (Mark	Title Senior Forms Analyst  zed filer Instruction  (If) (if) rements]	ns for 19.0 19.0 N/A Pers	Betty Osher descriptions of Personal Auto Prograte/Loss Cost Gorms Com	f the seng	ese fields)  ger Auto (Plantion Rates/Fax)	PA) Rates/Rul Rules/For	les		
7. 8. Filit 9. 10. 11.	Name and address  Betty Osher Safeco Plaza Seattle, WA. 98105  Signature of authorized filer Please print name of authori  ng information (see General  Type of Insurance (TOI)  Sub-Type of Insurance (Sub- State Specific Product code(s) applicable)[See State Specific Requi Company Program Title (Mark	Title Senior Forms Analyst  zed filer Instruction  (If) (if) rements]	ns for 19.0 19.0 N/A Pers	Betty Osher descriptions of Personal Auto Prograte/Loss Cost Forms Com Withdrawal Con Control Con Control Con	f the ram	ese fields)  ger Auto (Plantion Rates/Fax)	PA) Rates/Rul Rules/For	les		

PC TD-1 pg 1 of 2

## **Property & Casualty Transmittal Document---**

	<u></u>	
15.	Reference Filing?	Yes No
16.	Reference Organization (if applicable)	N/A
17.	Reference Organization # & Title	N/A
18.	Company's Date of Filing	April 3, 2008
19.	Status of filing in domicile	Not Filed Pending Authorized Disapproved
20.	This filing transmittal is part of Company	Tracking # 08-AR-042008-F
20.	This iming transmittar is part of Company	11 acking #   00-1110-042000-1
21.	Filing Description [This area can be used in li-	eu of a cover letter or filing memorandum and is free-form text]
liabi		sureds, we are now offering insureds with higher limits of nancial interests by allowing them to buy back the punitive or the policy.
22.	<b>Filing Fees</b> (Filer must provide check # and for [If a state requires you to show how you calculate the state requires you to show how you calculate the state of the state o	ee amount if applicable) lated your filing fees, place that calculation below]
	neck #: 1410063 nount: \$50.00	

\*\*\*Refer to each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)

Refer to each state's checklist for additional state specific requirements or instructions on calculating

fees.



#### SAFECO PROPERTY & CASUALTY INSURANCE COMPANIES

Safeco Plaza Seattle, WA 98185-0001

April 3, 2008

Phone: (206) 545-5000 www.safeco.com

Safeco Insurance Company of Illinois 163-36012
Independent Automobile Form Filing
Personal Auto Program
Safeco Optimum Package – Liability Coverage,
Coverage for Punitive Damages, SA-2750/EP 4/08

Proposed Effective Date: June 26, 2008 Filing Number: 08-AR-042008-F

The above captioned endorsement is filed on behalf of the company (ies) listed. This is a new form and will not replace any forms currently on file.

In response to requests from our agents and insureds, we are now offering insureds with higher limits of liability the opportunity to further protect their financial interests by allowing them to buy back the punitive or exemplary damages exclusion under Part A of the policy.

The rate for this coverage will be filed later under a separate filing.

We are requesting an effective date of June 26, 2008.

Sincerely,

Betty Osher, CPCU Senior Forms Analyst

Office of Regulatory & Government Affairs

(206) 473-5309 FAX 206-473-6722 betosh@safeco.com

EJO/wtv